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Division of Solid and Hazardous Waste  
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UTAH DIVISION OF  
SOLID & HAZARDOUS WASTE

## 2006 SOLID WASTE LANDFILL ANNUAL REPORT

For Calendar year 2005 or most recent fiscal year

### Administrative Information

Facility Name: Antimony Town Class IVb Landfill  
Facility Mailing Address: PO Box 120046  
(Number & Street, Box and/or Route)  
City: Antimony, State: Utah Zip Code: 84712  
County: Garfield

Contact's Name: Calvin Gleave Phone No.: ( 435 ) 624-3218  
Title: Landfill Operator  
Contact's Mailing Address: General Delivery, Antimony, Utah 84712  
Contact's Email Address: \_\_\_\_\_

### Owner

Name: Antimony Town Phone No.: ( 435 ) 624-3300  
Mailing Address: PO Box 120046  
(Number & Street, Box and/or Route)  
City: Antimony, State: Utah Zip Code: 84712

### Operator (Complete this section only if the operator is not an employee of the Owner shown above)

Name: Calvin Gleave Phone No.: ( 435 ) 624-3218  
Mailing Address: PO Box 120055  
(Number & Street, Box and/or Route)  
City: Antimony, State: Utah Zip Code: 84712

### Facility Type and Status

<input type="checkbox"/> Class I	<input type="checkbox"/> Class IIIb	<input type="checkbox"/> Class V
<input type="checkbox"/> Class II	<input type="checkbox"/> Class IVa	<input type="checkbox"/> Class VI
<input type="checkbox"/> Class IIIa	<input checked="" type="checkbox"/> Class IVb	

Does the facility have a construction and demolition (C/D) cell as part of the permit (not operated under a separate permit number)? Yes X No \_\_\_\_\_

If facility was permanently closed during the year enter date closed: \_\_\_\_\_

### Annual Disposal

Total facility tons: 30 tons or cubic yards: \_\_\_\_\_

*If separate tonnages are available*

Municipal tons: \_\_\_\_\_ or cubic yards: \_\_\_\_\_

C/D tons: 20 tons or cubic yards: \_\_\_\_\_

Industrial tons: \_\_\_\_\_ or cubic yards: \_\_\_\_\_

\*10 Tons dead animals

### Conversion Factor used

☒  
☐  
☐

No conversion factors used

Conversion factor from rules (R315-302-2(4)(c)) used

Site specific conversion used Please list: \_\_\_\_\_

Tons Recycled: 15 tons

Cubic Yards Recycled: \_\_\_\_\_

### Financial Assurance

Current Closure Cost Estimate: \$10,000

Current Post-Closure Cost Estimate: \_\_\_\_\_

Current Financial Assurance Mechanism: \_\_\_\_\_

(ie. Bond, Trust Fund, Corporate or government Test etc.)

Financial Assurance Mechanism Holder: PTIF #6539

(ie. Name of Bond Company, Bank etc.. If PTIF Account give account number)

Current Amount or Balance in Mechanism: \$2045

### Other Required Reports

**Financial Assurance:** Each facility must recalculate the cost of closure and post-closure care to account for inflation and design changes each year. The recalculation, along with proof that the new cost estimates are fully covered by the assurance mechanism currently be utilized, must be submitted. Facilities that are using a trust account should include a copy of the most recent account statement.

**Note** Facilities using "Local Government Financial Test" must provide the information required in R315-309-3(7)(d) each year.

**Ground Water Monitoring:** Each facility that is required to monitor ground water must submit a ground water monitoring report that contains water elevations, sampling results, and statistical analyses. Check box if facility is exempt from ground water monitoring ☐

**Explosive Gas Monitoring:** A gas monitoring report must be included unless the facility is a Class II landfill that has receive an exemption, a Class III, IV, or VI landfill, or any other facility that has an exemption.

Check box if facility is exempt from gas monitoring ☐

**Training Report:** A report of all training programs or procedures completed by facility personnel during the year.

Signature: \_\_\_\_\_

*Cahvin Gleave*

Date: 2-2-06

Signature should be by an Executive Officer, general partner, proprietor, elected official, or a duly authorized representative. A duly authorized representative must meet the requirements of the solid waste rules (UAC R315-310-2(4)(d)).

Print name: \_\_\_\_\_

CAHVIN GLEAVE

Title: \_\_\_\_\_

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